

**Work Order ID 126606**

Monday, November 17, 2014 1:10:59 PM

**\*126606\***

Page 1

Item ID: D3933-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Wall Protector

Start Date: 11/19/14 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 11/21/14 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan: 

Date: 11-17

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

Draw Nbr

Revision Nbr

D3933

A

100

0.00

**\*100\***

Waterjet

Memo

0.00

FLOW CNC Waterjet

1-Cut as per Dwg D3933

Dwg Rev: AProg Rev: A

2- Deburr if necessary

①

DC 14/11/15

110

QC2- Inspect parts off machine FAI/FAIB

0.00

**\*110\***

QC

Memo

0.00

Quality Control

①

2/DC 14/11/15

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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**Work Order ID 126606****\*126606\***

Page 2

Item ID: D3933-1

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Wall Protector

Start Date: 11/19/14 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 11/21/14 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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120

QC8- Inspect parts - second check

0.00

**\*120\***

QC

Memo

0.00

Quality Control

(1)DAS  
38  
9-89

NOV 20 2014

130

Identify as per dwg & Stock Location: PP 126795 0.00**\*130\***

Packaging

Memo

0.00

Packaging

DAS  
06  
9-89

NOV 26 2014

140

QC21- Final Inspection - Work Order Release 0.00

**\*140\***

QC

Memo

0.00

Quality Control

14/12/2014  
MF  
14-11-26

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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# Picklist Print

Monday, November 17, 2014 1:11:03 PM

Page 1

Work Order ID: 126606

**\*126606\***

Parent Item: D3933-1

**\*D3933-1\***

Parent Item Name: Aft Wall Protector

Start Date: 11/19/14

Required Date: 11/21/14

Start Qty: 1.00

Required Qty: 1.00

## Comments:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04		Purchased	No			100	sf	4,809.353	7.01	9			

**\*MI FXS 125-F60029-04\***

**\*\***

GE PLASTICS LEXAN SHEET

02/14/11/14

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT019	2249.35338	
124866	106	
m126425	160.925	
m127934	665	
m128746	80.505	
m129759	1236.92338	9.6666
SABIC	2560	
m130209	2560	

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



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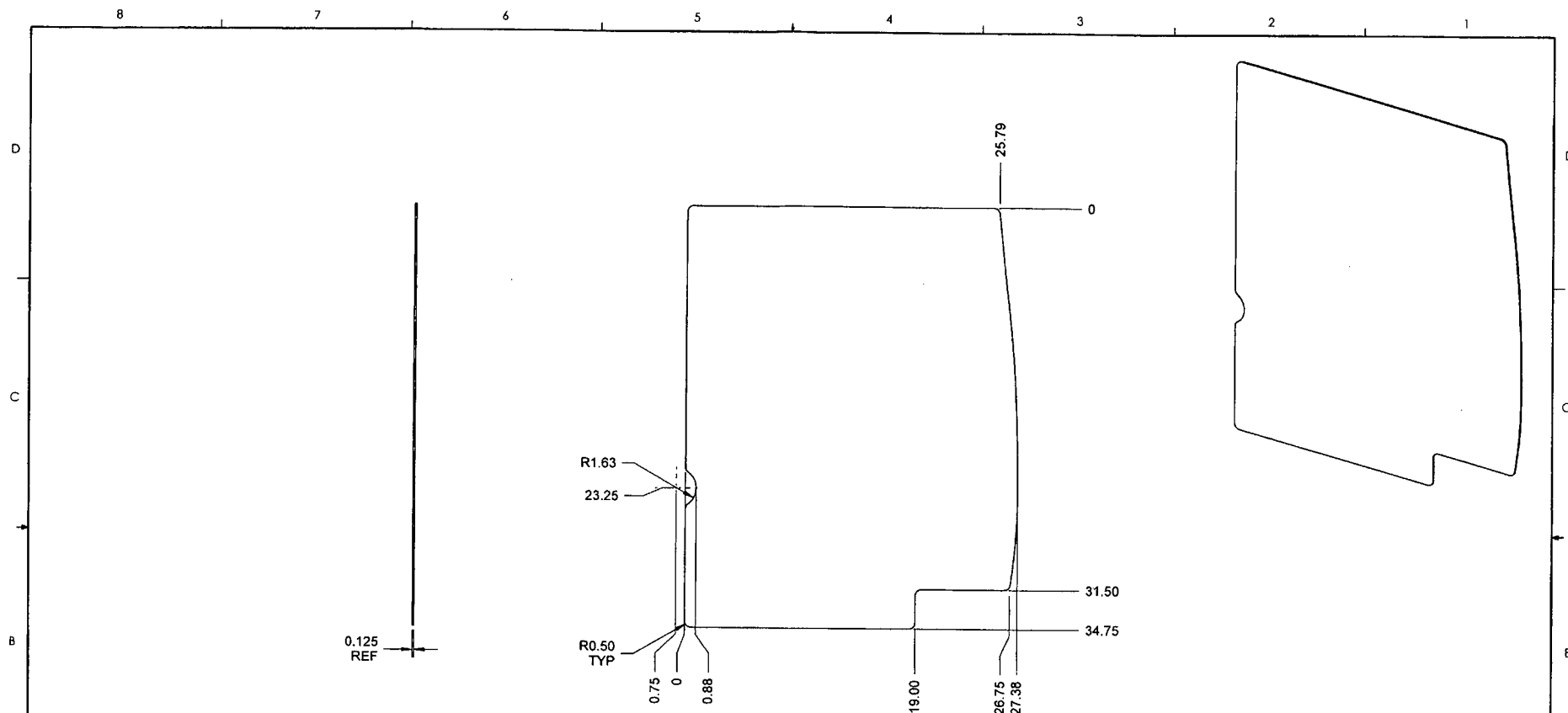


x 7

92 4

4





**D3933-1 AFT CABIN WALL PROTECTOR, LH**  
(TEXTURED SIDE SHOWN)

**RELEASED**  
09/06/03 JMT

**NOTES:**

- 1) MATERIAL: F60029-GY3778 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125 THICK  
REF DART SPEC MLEXS.125-F60029-04
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3933-1" AND B/N USING FINE POINT PERMANENT INK MARKER ON SMOOTH SIDE
- 7) WEIGHT: 4.94 lbs
- 8) CHECK PER TEMPLATE DT8921

*14-1-17*  
*125606*

A	NEW ISSUE		09.04.21
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	09.04.21		

<b>DART AEROSPACE LTD</b> HAWKESBURY, ONTARIO, CANADA	
DRAWING NO. <b>D3933</b>	REV. A
TITLE <b>AFT WALL PROTECTOR</b>	SCALE NTS
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